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On the Margins: Dementia and the Present Moment

Cariad Astles
cariadastles@gmail.com

Resumen: El artículo presenta el uso de títeres dentro del trabajo con personas con demencia. A partir de la noción de Foucault de que el conocimiento se construye dentro de estructuras de relaciones de poder, cuestiona la idea de la productividad como propósito, y destaca el potencial de la imaginación, la creatividad y el momento vivido para posibilitar el bienestar. El artículo analiza dos casos extraídos de cafés de la memoria y centros de día de Devon, en el Reino Unido, en los que los participantes en los proyectos fueron invitados a contribuir en el desarrollo de actuaciones teatrales por medio de la interacción con títeres y otras actividades relacionadas. El artículo analiza también las cualidades particulares de los títeres para posibilitar estos intercambios, y su potencial como objetos flexibles y sensibles, capaces de operar simultáneamente en múltiples niveles para promover la actividad creativa. Se incluyen otros ejemplos de trabajos realizados en los EE. UU., Argentina, Alemania y Suecia.

Palabras clave: títeres; demencia; memoria; Foucault; narrativa.

Abstract: This article discusses the use of puppetry within work with people with dementia. Drawing on Foucault's notion of knowledge being constructed within structures of power relations, it challenges the idea of productivity as purpose, and highlights the potential of imagination, creativity and the lived moment to enable wellbeing. The article analyses two key case studies undertaken at memory cafes and day centres in Devon, UK, where participants in the projects were invited to contribute to the development of performance through interaction with puppetry and related activities. The article further analyses the particular qualities of puppetry to enable these kind of exchanges, and their potential as flexible and responsive objects, capable of operating on multiple levels simultaneously to promote creative activity. Further examples of work undertaken in the USA, Argentina, Germany and Sweden are discussed.

Keywords: puppetry; dementia; memory; Foucault; narrative.

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The image of dementia sufferers is prevalent in contemporary Western society: a growing group of inarticulate, isolated, lost people incapable of expressing themselves or of taking decisions about their lives, which have value only in the memory of their past. Healthcare authorities have expressed alarm about the growing need to care for people with dementia, as people live longer, and to fulfil societal obligations to offer quality of life to those who can no longer ensure it for themselves. Political imperatives about productivity of life in relation to national economics are at odds with the idea of a 'caring society'; the prime minister in the UK at the time of writing, David Cameron, identifies dementia as a 'national crisis'¹. Dementia, therefore, is a problem; political narratives of healthcare suggest there is a need to scrutinise it through the dominant medical model as something to be cured, prevented or slowed wherever possible². Dementia sufferers are people on the edge of society, with a need to be cared for.

The medical model of healthcare, where illness or disability is seen as a problem which can be treated through external means, has in recent years opened up more space for the arts to resume a place in healthcare as a palliative form of therapy. The term wellbeing has become widespread as a modern term to indicate psychological and physical health³. The wish for the arts to have societal value is enhanced by their apparent healing benefits, thus increasing the belief in their use as a quantifiable method to use alongside conventional Western medicine. The film *I remember better when I paint* explores the value of the creative arts in bypassing the limitations of dementia and highlights the continuing presence of imagination in people with dementia which can be further developed through participation in artistic activities⁴. Robert Stern, a professor of neurology and neurosurgery at Boston University, notes their value: 'Whether it be fine arts, music, listening to music, going to museums... those things do not have an impact on the disease (demen-

¹ <<http://www.bbc.co.uk/news/uk-politics-17513762>>.

² <<http://www.helpguide.org/articles/alzheimers-dementia/alzheimers-and-dementia-prevention.htm>>.

³ Wellbeing is a relatively recent term in popular circulation; it is widely used, however, in studies of economics and the relationship between economic strength and a feeling of positivity in many areas of life. The New Economics Foundation have identified a successful society as one which: 'delivers high levels of sustainable wellbeing for its citizens' (<<http://www.neweconomics.org/issues/entry/well-being>>).

⁴ <<http://www.irememberbetterwhenipaint.com>>.

tia) per se. What they do most likely is get through to the person (with dementia) by exploiting the areas of the brain which are least impaired. Anything that can touch the patient through that network of brain [areas] can have a profound impact⁵. Over the last two decades, a number of pioneering programmes have been set up to expand the use of the arts in healing in general; a number of concrete benefits were identified by a programme at the University of California (Art that Heals) as the following: 'to restore a sense of *self-control* by the patient/participant, to *reduce stress*, to facilitate coping, and to tap into *life-affirming* inner sensitivities.' (Kaye and Blee, 1997: 126). Most of such programmes have focused primarily on music to promote relaxation, and on the visual arts to enhance the visual environment. Therapists working with people with dementia have noted that the arts can have positive effects with different forms of dementia, including fronto-temporal lobe dementia, vascular dementia and memory loss and confusion, from early stages to more advanced dementia⁶.

According to the work of Mike White, health is a social concern and practice rather than a medical one; furthermore, creativity is one of the key indicators of both individual and community health. Research has begun into the health-giving aspects of involvement in creativity over the long term; the University of Florida, for example, runs a creative writing programme to promote healing⁷. White notes that the use of the arts in healthcare is a relatively recent phenomenon; a number of arts in healthcare projects were set up in the 1980s but were very sporadic; according to recent research, involvement in the arts has a positive impact not only on healing itself (drawing on ancient studies of medicine from Hippocrates and Galen, for example, who 'prescribed' artistic activities amongst others to assist processes of healing), but also on the wider conception of health and its social determinants (White, 2009: 13-16). Participation in artistic activity, for example, increases a sense of community and wellbeing, both key factors in the understanding of community health. Participation in the arts can raise status and purpose through an increase in social capital, including the development of social networks and the norms of reciprocity and trustworthiness that arise

⁵ Cited in the film mentioned above, *I remember better when I paint*.

⁶ <http://engageutah.org/data/documents/Reawakening_the_Mind-1.pdf>.

⁷ <<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2804629/>>.

from them. It works both as a preventative phenomenon and a curative intervention. White, citing Michael Wilson, notes that: ‘factors which make for health are concerned with a sense of personal and social identity, human worth, communication, participation in the making of political decisions, celebration and responsibility. The language of science alone is insufficient to describe health; the languages of story, myth and poetry also disclose its truth.’ (White: 17). White’s comments reflect the modern concept of the state having responsibility – indeed a moral obligation – to intervene in the biological affairs of the population, as posited by Foucault as an entirely modern idea; this intervention offers the state (under the umbrella concern of its moral obligation) the opportunity to analyse, judge, categorise and identify people with certain conditions, thus creating for itself a place of power in the individual lives of others (Rabinow, 1999: 11).

According to Foucault, the marginalisation and division of sections of society into categories of illness, deviance or weakness, subjectifies them and makes them open to scrutiny by dominant models (in this case, the medical hierarchy); Foucault further posits that this categorisation of people as deviant from the ‘norm’ increases and enhances their ‘difference’ through highlighting their individuality⁸. History and knowledge, we may understand, are elaborated and interrogated according to constructions of belief and political narrative. How we interpret and categorise the past world depends on our political understanding of the present and its priorities. When working with people with dementia, therefore, how carers and healthcare providers engage with the memory of participants in healthcare programmes must depend to a large extent on the prerogatives of their own programmes. It could be argued that in the UK and Western Europe in 2014, the vast numbers of arts programmes, performances and projects which were funded to enact World War One narratives were almost entirely a result of externally-

⁸ Like the poor, insane and vagabonds referred to by Foucault at resident at the Hôpital Général in Paris in 1656, the classification of dementia medicalises and stigmatises those with the illness. The consequent taking over of the lives of dementia sufferers by bringing them into the medicalised model, where their social and cultural classification is dominated by this labelling, furthers dominant modes of power relations whereby they are turned into subjects and objectified through study, analysis and intervention.

driven political decisions about how the past should be remembered⁹. The placing of World War One firmly in the minds of schoolchildren, theatre-goers, community residents and the elderly serves to provoke memories of a particular kind. Attempting to re-engage and activate cognitive memory with dementia sufferers is complex, therefore: how can an artsworker genuinely engage with the world of the person with dementia, without imposing their own agenda, or the agenda of the medical profession? The dominant model is that of purposeful and productive engagement with matters arising from political frameworks (if we take Foucault's view that all discourse is politically narrated). The discussion is delicate; on the one hand, purposefulness and decision-making are seen (in White's proposal, above) as key factors in wellbeing, or a sense of contentment; on the other hand, purposefulness and decision-making can be seen as ideas created externally to suggest, but not enact personal power. Who can say whether purposefulness and self-fulfilment can genuinely be felt by someone with advanced dementia? According to a Foucauldian interpretation of the world, 'knowledge of all sorts is thoroughly enmeshed in the clash of petty dominations...' (Rabinow: 6). Should these 'petty dominations' be the real questions at all in caring? Indeed, Foucault's suggestion that to identify those with illness/mental illness (in this case dementia) as a group *in need of care and scrutiny* at all creates its own problematics: once diagnosed, is the disease self-fulfilling? (Downing, 2008: 30) Does the increased attention to, separation from others and care for people with dementia mean that carers and society at large create deeper anxieties and the sense of isolation by their focus on the disease as the identity of the person? Does the focus on the preservation of memory and invocation of the past ignore the present experience of the dementia sufferer?

This article therefore has two primary purposes: firstly, to attempt to reposition the place of memory and the past in the idea of care for

⁹ The Government of the UK issued directives to arts funders emphasising the importance of prioritising projects which intended to participate in WW1 commemorations; the Arts Council noted that: *Arts Council England will be working in partnership with the Imperial War Museum and the Heritage Lottery Fund to ensure a joined-up cultural approach to the First World War centenary from 2014. This sits within the Government's plans to mark the centenary of the start of the First World War through a programme of arts, culture and education* (<<http://www.artscouncil.org.uk/what-we-do/supporting-museums/first-world-war-commemorations/>>).

those with dementia, suggesting alternative visions of purposefulness not related to past linear cognitive functions; to challenge dementia's marginalised and 'problem' status; and secondly, to explore the specific beneficial and unique features of using puppetry with people with dementia: its ability to connect, make meaning and accompany. Puppetry sits on the edges of the theatre world and functions according to different semiotic codes from those of mainstream theatre (Jurkowski, 2013: 90); those with dementia occupy the fringes of productive society; perhaps, similarly, we should view their role and purpose differently.

The Western model of learning remains based on evidence-based practice, with a focus on cognition and academic reiteration of learning. Contemporary educational practice is dominated by literacy and numeracy, which remain primary within studies and history is evaluated according to dominant narratives expressed through linear, fact-based accounts¹⁰. Theatre, social history and the arts in general have gone some way to disturb this dominant mode of thinking, in their emphasis on relationality, psycho-physical processes and phenomenology¹¹. Medical practice and social services nonetheless predicate their diagnoses and subsequent interventions on material and evidence-based practice: someone suffering from an illness is generally treated for that illness rather than being treated as an individual; someone in material need in society is considered to need support to enable their material needs to be met. There remains, therefore, a gap between the arts' and some social historians' approaches to wellbeing and purposefulness, and the prevailing medical and social model. Ideas of purpose are intrinsically linked to ideas of productivity, contribution and independence. The idea of the purposefulness of people who are entirely dependent on others for their material needs, and who cannot articulate historical events with accuracy, is a difficult concept. The linking of purposefulness to productivity can be linked to Foucault's suggestion that the notion of productivity was produced by states to ensure the control of conforming

¹⁰ In 1987 the Department of Education and Science, under Kenneth Baker, issued a consultation document that set out the rationale for a national curriculum.; this can be viewed at: <https://www.google.co.uk/?gfe_rd=cr&ei=vt43VlrwCfHH8gfOk4GwDw&gws_rd=ssl#q=rationale+for+national+curriculum>.

¹¹ See, for example, Zarrilli's approach to psychophysical training for the actor, or Barbe's emphasis on phenomenological processes: <<http://humanities.exeter.ac.uk/drama/research/conferences/changingbody/>>.

bodies to governmental priorities (Downing: 84). An alternative world-view (and one increasingly in vogue amidst fears of world resources running out) would be to consider productivity in material and intellectual goods, generation of networks and resources and involvement in society based on action and impact, to be an exhausting (in the sense of exhausting resources) and damaging strategy. It does not necessarily follow that productivity in its own right is necessarily a beneficial phenomenon, despite political rhetoric asserting its importance. To assert that those with dementia should be productive, as an assumption that productivity is a primary means of meaningfulness, may be unhelpful. I would challenge the activity-based approach to dementia as conforming to the productivity equals purpose agenda. Attempting to engage those with dementia in the new creation of artefacts, crafts, food, etc, as a symbol of their meaningfulness, may be unhelpful. The making of meaning, however, is a different matter. Studies of narrative, particularly those from psychodrama and trauma theory, point strongly to the creation of narrative as essential in the preservation of meaningful identity (Kirmayer et al, 2007: 475). Young notes in Kirmayer et al that history has to an extent been replaced with counterhistory based on memory: 'a new social epistemology ... attentive to the dissenting and resisting voices that had previously been ignored, and to the various forms of non-verbal remembering inscribed on people's bodies and encoded in rituals, sanctified geographies, and artefacts' (Kirmayer et al, 2007: 349). This 'counterhistory' embraces the varied nature of memory, and does not proscribe it to be linear, coherent or even collective, in tune with those around us. Young further suggests that the last hundred years or so of Western historical experience is filled with trauma due to the violent and brutal nature of actions enacted on others throughout the twentieth and twenty-first centuries, and the knowledge of those actions in the public domain. Memory, he suggests, is therefore already filled with trauma through the political affects of our lived lives – and to recall trauma means the need to process the trauma in some form. It is therefore likely that memory has the hard task of both recalling events and facts, and processing them simultaneously so that they cause less harm. Within trauma therapy, different methods of recollection have been pointed to as methods of processing memory, including flashbacks, hypervigilance for threat, guilt, numbing of reaction and tuning out (McNally, 2003: 8). These behaviours seem to be common features

of those with dementia. Young's thesis, that all contemporary memories are in a continual process of dealing with trauma, is a controversial and provocative one, which may go some way towards extending the debate about the increase in both mental illness and in dementia, but it is not in the remit of this article to explore this fully. It does, however, support the idea of meaning being drawn not from a single and simple line of accurate evidence-based recall, but from those confusing aspects of memory: its episodic nature, its fragmentation and contradiction and multiple articulations. It is, as Young notes: 'naked and immediate, saturated with eventfulness', giving access to the 'collective, chaotic past and confusing present' (Kirmayer et al, 2007: 349).

Puppetry is increasingly used with dementia sufferers as a therapeutic practice. Previously, care for those with dementia has, according to Kaye and Blee: 'been equate(d) with control and surrender...' (Kaye and Blee, 1997: 7). Following on from ideas expressed in dramatherapeutic processes, Kaye and Blee further note that: 'our use of the arts comes from direct personal experience – the need in our lives to mark moments, express feelings and celebrate...this is the quality of communication...' (Kaye and Blee, 1997: 116). I suggest that puppetry occupies an unsettling place within human perception of life and thus has particular qualities to offer to those for whom cognition, linear narrative and identity is difficult. I will explore these through the examination of two case studies carried out by students from the Royal School of Speech and Drama in 2011 and 2012 respectively at the West Bank Healthy Living Centre in Exminster in Devon, and other care centres and memory cafes in Devon and London. In this work, the place of memory is less significant than the desire and need to accompany and mark the *present* moment. I will also refer to other examples of puppetry being used as accompaniment to enable the multi-faceted nature of identity to emerge as meaningful narrative.

I note above that puppetry occupies an unsettling place in human perception: as dolls, icons, ritual figures, puppets straddle the liminal space between being and non-being; between life and death; between truth and fiction (Francis, 2013: 5 -6). This unsettled space is crucial for this discussion. The uncertain space of reality is the one continually oc-

cupied by people with dementia. The confusion in people's minds (often exacerbated by the intent by well-meaning carers to bring dementia sufferers back to the dominant space of cognition) about the world they inhabit and the identity of those around themselves, is in flux. Puppets are able to accompany those with dementia in this changing and chaotic world. They may appear as friendly companions; those with dementia may see them as fellow wanderers through worlds and sensations, without any need to be tied to a specific place and time.

Within dementia, social and cultural boundaries may be lost as people frequently express uninhibited thoughts, unmediated by social discretion. This unleashing of emotion, thought and commentary can be enabled through puppets. As outsiders to the socially acceptable world, puppets often function in theatre as commentators, satirical, political and childish in their raw and rude reactions; they thus enable performance of the taboo, that which is hidden. As they are not human, they are able to speak the unspeakable and break social codes of conduct. This permissiveness is important in dementia sufferers as 'normal' social codes of behaviour break down. Puppets are permitted to be rude and so can provide release and acknowledgement for those experiencing confusion, aggression and unsociable behaviour. The performance of multiple personalities is important where a sense of identity is confused; aspects of personality can easily be represented through puppets.

A further aspect of puppets is their quality of vulnerability; intrinsic in and implicit to the puppet is awareness of it as a vulnerable and fragile being, dependent on others for all its movements and utterances, without whom it would have no life; similar perhaps to the daily experience of people with dementia. It has previously been noted among children that the presentation of the puppet as something or someone vulnerable enables empathy and identification, but also enables the child or vulnerable person to have power as they recognise something more vulnerable than themselves¹².

Puppets as material objects can be used to evoke and stimulate sensory response; by using different surfaces and textures in the construction of the puppet, people with dementia are able to respond to

¹² Melissa Trimingham's discussion on puppetry and neuroscience discusses the relationship between kinaesthetic empathy and puppetry through an analysis of Blind Summit's *Table*, indicating that the particular qualities of the puppetry enable a deeper appreciation of empathetic self.

a multi-sensory object, activating senses other than the cognitive and linguistic ones. Touch, in particular, seems to evoke positive response; again drawing from trauma theory, the importance of body memory and behavioural memory held through the sense has been highlighted as an important indicator of truth through nondeclarative behaviour¹³. Karrie Marshall's pioneering work with puppetry in care homes bases much interaction on the use of a kitten puppet to develop qualities of care, concern and stimulation of senses as the participants in her projects are able to be tactile with the puppet without having to be careful (Marshall, 2013: 27).

The two projects carried out by students at the Royal Central School of Speech and Drama had different named purposes: to enable participants in the projects to have power in decision-making, without insistence on historical 'truth'; to enable social and individual commentary with resultant identity assertion, and to promote overall wellbeing. One of the features of both projects was to explore wellbeing in the present moment rather than to attempt to activate past memory; to celebrate the episodic nature of memory and identity, and to enable meaning-making through fragmented narratives. Stephen Pettet-Smith, director of Exeter Healthcare Arts has noted that the importance of arts work with dementia sufferers is that it can give them 'a series of fleeting and repeated moments of wellbeing'. The projects took place as part of a curricular activity for undergraduate students of Applied Theatre working in community settings. These specific projects were set up in liaison with Exeter Healthcare Arts and the West Bank Healthy Living Centre; the author of this article was supervisor and consultant to the projects, but not activities facilitator. The projects took place over two months between May and June each year, and entailed weekly visits to the Centre with accompanying activities. Puppets were made as narrators of and mediators within specific dramatic narratives. Short performances were created where the outcome of the situation was open-ended; participants were invited to intervene (verbally or practically) in the situation to determine the next line of action; warm-up and follow-up activities were used to stimulate discussion and interaction, and puppets were used to

¹³ By 'truth' here I refer to the validity of the person's experience within their own perception, noting that truth is drawn from bodymemory, the senses and direct experience, as well as that held on record as official 'truth'.

commentate, accompany and perform. Whilst noting the importance and impact of reminiscence theatre, used by many theatre practitioners for project work with the elderly, these projects sought not to focus on the past as relevant time period, but instead on the present experience¹⁴.

Within the first project (in summer 2011) a love story was devised which developed into a narrative touching on themes of family, work, community, war, children and travel. Each mini-performance (lasting around fifteen minutes) was devised as stand-alone, but each was also linked to the previous performances as well. It did not therefore matter if the participants had either seen or remembered the previous performances. These performances were interactive in that while a situation was set up with a particular focus in each week, the future actions of the characters in those situations were decided by the participants in the workshops. The performance would therefore break off at key moments for discussion with the participants, who commented upon the decisions made by the characters, and offered advice for solutions. One example of this was where Ben, a postman, fell in love with a mysterious woman, but did not know how to approach her. Through the ensuing discussion, ideas about what men and women like and need in relationships, preferred methods of wooing, and love itself, were discussed. The postman in the performance took advice from the participants and the performance proceeded with the inclusion of that advice. Further activities included songs familiar to the participants, and discussion of the performance. Most notably, however, was the frequent use of two puppets to direct and lead the warm-ups, and to comment on the action in the story, acting as go-betweens between the audience and the performers. These puppets, in the form of an older woman and a child, invited reflection and commentary from the participants, often commenting unfavourably themselves on the characters' actions, or developing the conversation in such ways as to enable increased discussion between the participants. The puppet characters became features of the performance itself, as fictitious members of the community in which the action took place. As sessions developed, the participants from the

¹⁴ Reminiscence theatre was for many years, since the pioneering work of Pam Schweitzer with Age Exchange, the primary mode of theatre and performance for the elderly. Much as this area of work created opportunity and recognition of the value of peoples' life stories, it has been critiqued for its focus on the past only as a relevant period of time for performance.

centre increasingly took control of the puppets themselves, and used them to offer further commentary. At times they used them as characters and at times rather as devices through which to speak. The participants also expressed great interest in the making of the puppets themselves as a craft activity and were able to engage to a great extent on different levels: acknowledgement of the puppets as designed and crafted objects, and as characters. As noted previously, this use of the puppets as spokespeople is a common feature of puppetry performance in situations of tension or politically charged environments; the puppet embodies the quality of subversion and of rebellion; although manipulated and therefore always under the control of another, it simultaneously represents freedom and vulnerability. These two qualities were essential to the work created with these groups; to allow the puppets to enable freedom of expression and acknowledgement, and to acknowledge their vulnerable status as only puppets, thus enabling empathy and connection. Where purposefulness can be separated from material productivity, and focused on purposefulness of connection and validity, there is much to offer. The students also employed the use of a multi-sensory memory bag in their performance. The memory bag held objects of varying natures and qualities, which served both to evoke memory, and to stimulate discussion, as well as dictating the future progression of the performance. The objects included, for example, clothes, train or plane tickets, photographs, mobile phones, material objects from both past and present contexts. The participants put their hand into the bag as in a lucky dip, and the object they encountered became the subject for discussion, and also that which subsequently intervened in the narrative of the story. Further to the discussions, the use of the puppets extended to more prolonged conversations and encounters with the participants. Sometimes the puppets merely sat on the participants' laps, companions to their witnessing of the performance. At other time they chatted to them, responding to whatever came up for the participants. Lengthy discussions took place about how far the puppets should concur with the participants in their relating of events and characters; whether to acknowledge the feelings expressed, where facts were at odds with the students' perception; whether to correct them, or whether to engage fully in the situation being expressed. It was agreed that to correct would cause confusion and distress, and so to enable the participants in their own assertion of reality, or at least to support their

sense of truth, was the most validating approach. This approach further acknowledges the Foucauldian stance that knowledge is created in relations of power, rather than existing in its own right, and that truth is made up of multiple perspectives (Rabinow, 1991: 7). Acknowledging individual narrative and identity is key to many therapeutic approaches, including narrative theory and psychodrama. In psychodrama traumatic or significant events are performed in order to enable the participant to safely revisit emotions and situations. Puppets can act as mirrors or doubles of the participant; in the work at West Bank, puppets sometimes acted out participants' own experiences as part of the story, as suggested by participants. Vizzini, a therapist who has used puppetry extensively for work with children, notes the importance of individual story in identity-formation: 'Narrative theory offers another way of understanding selfhood and unique identity. Research in narrative theory, both in psychology and theology, has confirmed that human personality is storied. Human beings do not simply tell stories, or illustrate their lives with storytelling. We construct our sense of identity out of stories, both conscious stories and those we suppress'. (Vizzini, 2002: 38) Puppetry can be considered particularly valuable in narrative transaction due to its status as a transitional object, as defined by Winnicott, enabling the 'transitional space' as a psychic space which permits play¹⁵. Puppets are able to construct different narratives with groups of people or individuals due to their lack of fixity; they can represent whatever is required to be represented, thus celebrating and marking the choice of the participant in the story of their life. Contrasting or contradictory stories were often offered during this first project; these different versions were accepted as part of the overall narrative. People with dementia often experience identity confusion; the use of puppetry in these contexts is often to enable the participant to engage with an aspect of their identity which may be dominant at a particular time, and to authenticate the emotions and associations connected to that aspect of identity. This is not always simple; on one occasion, a woman went into great distress at the presentation of a baby and repeatedly repeated that the baby was dead, something clearly causing her unhappiness. Here it

¹⁵ Donald Winnicott was a paediatrician and psychoanalyst who defined the idea of a 'transitional object' as a means for a child to separate safely from their mother and establish autonomous behaviour.

is important to note the power of performance to unlock moments of anguish and emotion and the importance of sensitivity to potentially difficult occasions. On other occasion, one of the participants became abusive to one of the performers, suggesting that she was unattractive and looked like a boy. At other times, confusing or confused suggestions were made; it is part of the task of the theatre worker to respond with flexibility to each moment. The use of puppets facilitates this process; as noted above, puppets can move easily between different identities to create new encounters. Overall evaluation of the first project suggested that a greater sense of wellbeing had been experienced by the participants through their body language and verbal response to sessions. Evaluation by centre staff, students and supervisor suggested that the project, whilst achieving its primary aim of creating fleeting moments of wellbeing, could have developed more challenging content; the participants were eager to vocalise their thoughts, and this was taken on in the second project.

The second year of the project also took place with a similar group of students, and also at West Bank, but included a series of performances and activities at memory cafes in the Exminster area. The subject of the Queen of Great Britain was used as a stimulus due to the event of the Queen's Jubilee that summer. The Queen was due to give a series of speeches about her reign and her current priorities and thoughts, but was unable to remember what she was required to say. The participants were therefore invited to give her advice and to suggest ideas for her speech to the nation. This activity produced much interest as it enabled discussions about royalty, the monarchy, republicanism and indeed politics in general. The debate thus extended beyond the immediately personal to the wider world of politics; puppets used included a corgi puppet. The students also worked on using puppets as accompaniments to the participants. This was particularly the case where people had more advanced dementia. Influenced by work by Marshall and Silverberg, the students used puppets to sit next to or with participants who did not seem able to participate verbally. Several things were noted: the participants noted the 'difference' of the puppet and wished to take care of it; the participants did not feel obliged to respond to the puppet logically, and therefore engaged with it in any way s/he wished to; and the participant had the sense of a shared presence which gave their own presence vitality and importance. A moving narrative by Karrie

Marshall testifies to this idea that the most important use of puppetry with people with dementia is in the sense of being accompanied; she delivered an inspiring talk at the Hands On! Applied Puppetry conference in 2011, where she noted a particular example where she sat with her puppet alongside a person with dementia, focusing on matching the breathing of the puppet to the breathing of that person. The man, who had not spoken in weeks, suddenly broke into religious song (he had been a vicar)¹⁶. I would suggest that the use of puppetry, vulnerable, controlled beings in search of freedom, offers people with dementia the possibility of empathy and communication in a way that human actors or carers are possibly not able to do, as the puppet represents the child-like, unsociable, antisocial and fragile aspects of the human condition. Swiss puppeteer Maya Silverberg notes the relativity of each encounter with people with dementia and hence the importance of what she calls ‘partnering’. This goes further than Marshall’s ‘accompaniment’; Silverberg suggests that the world can only be perceived as a qualitative phenomenon in relation to each individual’s perception; for those with dementia, this sense is increased; each moment of encounter with the person with dementia (talking particularly about those with more advanced stage dementia) can therefore only make sense to that person if the reality of the engagement meets their sense of reality at that time. She therefore uses puppets to ‘partner’ each of these moments. This approach accesses from the participant whatever is offered, with no attempt to correct, introduce other elements or attempt to draw on ‘real’ memory. The puppet in this interaction should be perceived as a blank space to be filled by the perception of the participant: ‘Mrs B whispers confidentially: ‘With my right eye I can see things that are not three; soldiers marching and horses...we philosophise about what she can see in the past...’ Silverberg denotes this partnering as an affirmation of being, the most important aspect of the lived experience: ‘One possibility is opened, for the person to perceive themselves, to be touched, held and confirmed in their being: “I am.”’ She points to the different motifs that the puppet can represent: a figure for projection of ideas and feelings;

¹⁶ The one-day symposium at the Little Angel Theatre in London hosted workshops and talks in puppetry in healthcare, with early years, for literacy and within therapy. A follow-up two-day conference was held in April 2013 in collaboration with the Centre for Research into Objects and Puppets in Performance at the Royal Central School of Speech and Drama: <www.cropp.org.uk>.

something to substitute what is not there; something to be used as a channel for the participant's aggression, or other emotions, or as something to demonstrate identity. Silverfverg also notes the importance of the use of objects such as keys, purses, newspapers and clocks to denote power and structure within the daily world, and so to enable the puppet and participant to collectively handle these kinds of objects can offer a means of empowerment¹⁷.

People with dementia may often have a disturbed sense of identity and community. With modern-day flexibility of travel and the increased movement of people, in particular the removal of many people from their homes into residential care settings, and the disappearance of rational cognition, identity formation may therefore be often in a constant process of reinvention already. Behaviour sometimes suggests qualities akin to those shown by people with multiple personality disorder, including dissociation, disruptions in consciousness and personal identity¹⁸. If we consider multiple identity disorder to be a problem, and indeed, if we treat it with fear and ambivalence, this positions those suffering with it accordingly; if, however, each personality manifested is acknowledged and asserted as valid and meaningful, this may give rise to some greater sense of coherence between differing narratives and behaviours. Students in both projects invited and accepted all contributions to the narratives performed and discussed. It was a matter of surprise for the students how deeply the participants engaged in discussion at times, even if at other times they seemed withdrawn or unwilling to engage. Evaluations of the second project undertaken by the students emphasised the importance of both accompaniment and validation in the interactions with the puppets, and a clear case made for the flexibility of the puppets in enabling this kind of transaction.

Other examples drawn from Germany, Sweden and Argentina highlight puppetry's potential power to unlock strata of experience and feeling. Young, cited above in relation to trauma theory, notes the value of performance as myth and ritual to process trauma. Puppets, as representative icons rather than individual actors, have much to offer this type of performance. In themselves they are ritual performing objects and

¹⁷ <<http://www.figuretheater-maya-silfverberg.ch/index.php?id=8>>.

¹⁸ Multiple personality disorder is identified by McNally as that where many or several personalities are present in a person simultaneously, or subsequently.

therefore metaphorise the performed experience. German and Swedish puppeteers particularly focus on this use of puppetry as a metaphorical or ritual representation of the emotional and spiritual experience. Ide Hamre, a Danish puppetry researcher and co-founder of the international puppetry association (UNIMA)'s Commission for Education, Development and Therapy, notes that there are ten distinct qualities of puppetry which make them useful in therapeutic contexts: 1. firstly their quality of playfulness which generates internal change, consciously or unconsciously; 2. their flexibility of purpose; 3. their ability to recreate history through repeated play with the puppeteer/participant in charge of the action; 4. their inclusivity – everyone can participate regardless of their ability; 5. the puppet as a visual and material bridge between the unconscious and conscious worlds, acting as symbolic reference for material within the unconscious; 6. the facility the puppet possesses to move between worlds; 7. the potential of the puppet to enhance collaboration and diminish isolation through an intrinsically collaborative activity; 8. the power of the puppet to address taboo, painful or censored content (whether that censorship be individual or societal); 9. the empowering nature of a purposeful activity, and empowerment of the puppeteer through being able to animate a figure and/or story directly themselves; 10. and, most significantly perhaps for people suffering from dementia, the healing aspects of being able to perform parts of a confused and fragmented identity (Hamre, Ide, in Majaron and Kroflin: 6)

German puppeteer and psychotherapist Gudrun Gauda focuses deeply on the use of fairy tale, journey and the psychological 'maze' as metaphors for exploratory individual psychological journeys. Her training has been used by Åsa Viklund, a Swedish hospital counsellor and symbols therapist, who uses psychoanalytical techniques and processes in her puppetry work, where each puppet is constructed and used as a symbol of a psychological projection or state¹⁹. In the work of Viklund, Gauda and others, a sense of integrated self, distorted through dementia, can be achieved through the use of many puppets to represent the different selves. Like Hamre, cited earlier, Gauda notes the use of puppetry as an object for both the identification of projection (the 'double mirror') and as a tripartite relationship where the puppeteer, puppet and role join to create identity. Gauda's approach to puppetry with people with

¹⁹ <<http://www.therapeuticpuppetry.com/>>.

dementia draws primarily from Jungian-based concepts of the mythical imagination, and that puppets create links between the unconscious and conscious worlds while enabling the participant to both express and to unify their internal worlds through a concrete experience. She notes the primal importance of the participants playing with the puppets themselves as a crucial feature of identity-formation; the puppeteer does not therefore play solely to the participants, but must in some way offer puppetry as a means to perform themselves. Clear links can be drawn between Gauda's work with people with dementia and people who have undergone traumatic events in their lives. Clearly, there is a disruption of the continuity of identity and playing with puppets as *possible actors* to enact aspects of the personality or parts of personal history gives scope for alternative and more positive outcomes to be achieved. A further feature of Gauda's work is the focus on developmental tasks throughout life, which recognise and affirm the changes occurring at different stages in life, while linking external processes to internal journeys. Again, puppets are used as metaphorical markers along the life's journey.

The students in both projects recognised and affirmed the value of the puppets as performing objects, capable of acting out different aspects of personality, and capable of responding to whatever aspect of personality was enacted by those with dementia. The deliberate and conscious aim of focusing primarily on the present moment in the encounter was facilitated through this use, and puppets were found to be non-threatening partners in the theatre experience. Discussion of future work focused on the idea of returning to myth and fairy tale for future work, to examine if this would be an imaginative vehicle to explore imagination and identity; the overriding wish of the students not to patronise (through the use of fairy tale seeming to be too closely related to children's work) had led them away from this in the set-up to the project. Lastly, the use of the puppets as intermediary objects was highlighted, as things through which emotions, beliefs and ideas could be processed from the internal world (or one of them) to the external world. An examination was made of pioneering work in Argentina by psychodramatist Jaime Rojas-Bermudez in the use of puppets at the Hospital Borda in Buenos Aires with patients with various states of mental confusion, trauma and dementia. Rojas-Bermudez highlights above all the significance of puppets, through which patients are able to

see and manipulate elements of their lives and selves without danger to themselves. Rojas-Bermudez points to a number of essential qualities that the puppet should possess in order to engage with participants: it should be non-threatening as an object; it should be malleable; in other words able to represent different personalities; and the participant should be able to manipulate it and play with it for prolonged periods of time, without intervention from others, in order to permit full concentration of the patient on the object as transmitter of internal messages (Rojas-Bermudez: 3). Students noted that in future work, the puppets would specify less the type of character they were representing, and create figures which could more easily translate into different personalities. Above all, trust in the puppet as intermediary object was vital: it was rare that the participants would not play with the puppets, and therefore more time could have been given to enabling the participants to just play.

The ability to play is key to the participant's sense of achievement, of presence and of affirmation. Sally Knocker, a UK-based trainer for care workers with dementia notes the joy in care homes where people with dementia are enabled to perform functions that they have done during their earlier life; for example; an interview with her cited a miner who had a 'mine' created for him in the care home to enable him to do his job (Knocker: 10.12.13). An exemplary care home in the Netherlands gives its residents the opportunity to move between seven different 'home' environments according to their sense of identity at any time; each of these homes highlights different lifestyles and is based on the following: an upper-class home, where the carers act as servants; a religious environment; an urban-style design; a centre for crafts and trades, where people are able to participate in making; an artistic centre; a house for homemakers, and an 'Indonesian' space displaying Indonesian arts and crafts and designed to resemble an Indonesian home. The home has gained great acclaim for the levels of wellbeing experienced by residents²⁰.

Puppets can be used, therefore, to enable role-playing. This feature is perhaps the single most powerful aspect of the use of puppetry with

²⁰ The home – or village – as it is frequently termed – has achieved worldwide acclaim for the high number of 'happy' residents, and its pioneering approach is being considered by other homes through Holland.

people with dementia. Puppets intrinsically play roles given to them by their manipulators. In the two projects outlined above, puppets were used firstly to enable participants to act as outsiders and commentators, releasing censored material; further, to activate choice in decision-making; thirdly to provoke discussion, and lastly as companions in the construction (which may be playful, and acknowledged as so) of identity and narrative. Recent studies have demonstrated the importance of creativity in continuous good health: Cohen, amongst others, notes that where physical and cognitive faculties may diminish through the ageing process, creative processes often retain their earlier capacity and are not affected by ageing (Cohen: 8). The role of imagination with people with dementia can be harnessed to significantly improve quality of life. The neuropsychologist Damasio offers interesting analyses relating to consciousness; that 'core consciousness' is that of the cognitive human in full possession and unity of identity; but deeper consciousness, or 'extended consciousness' can be experienced by those who have lost the functioning of different parts of their brain through trauma or dementia (Damasio, 1999: 57). Extended consciousness emphasises a sense of self through interconnectivity of all things. A sense of consciousness as connected can therefore be experienced by those with very advanced dementia. Using puppets as performance elements may enable them to activate this extended consciousness. Indeed, dementia and illness themselves form part of a person's story, and are worthy of being marked as well as those moments of joyfulness, achievement and power.

In wider analyses of depression, isolation and consequent health risks in the elderly, depression particularly has been linked to a sense of powerlessness. Feelings of depression and isolation, even if not articulated in words, may be particularly prevalent amongst those with dementia. Offering people the chance to make decisions in the moment, therefore, about things both for and beyond themselves, may offer them a greater sense of power and agency in developing a sense of authority. Indeed, much contemporary research on mindfulness as a meditative practice as a means of treating depression suggests that too much focus on past and future as meaningful periods of time, in preference to the present

moment, gives rise to anxiety and depression, feelings of worthlessness and loss and inadequacy. In several regions, surveys have been set up to explore whether regular sessions of mindfulness could replace conventional drugs in treatment of depression, have had startling results in the increase, over time, of wellbeing amongst participants²¹. Puppetry, with its focus on sensation, acknowledgement of rebellion and marginality and improvised response, offers participants in activity sessions a place to be acknowledged and therefore to be mindful.

I would also suggest that the ability to accept and engage with multiple realities at the same time, such as being able to accept the fiction of a puppet show, while knowing the puppets are manipulated, suggests a greater sophistication and flexibility of thought amongst those able to navigate between different realities at the same time. During the two projects cited above, the ability of the participants to navigate multiple worlds was strong. Due to its liminal nature of existence between the worlds of reality and fiction, puppetry embodies the possibility of operating on different levels, including past, present, future, emotional perception and material reality. We can thus return to Foucault: while those with dementia are kept in care settings, labelled and separated, they are stigmatised and denormalised; if we are able to accept a multiplicity of experience and truth as part of perceptual reality, and those with dementia as individuals rather than problems, we may be able to avoid the fear that accompanies current concerns. Rather than lamenting the loss of a single dominant reality as a symptom of the gradual disappearance from life, I would encourage the celebration of imagination and creativity as distinct and purposeful features of life. Improvisation as a mode of interaction is a valid form of engaging with the world. It may indeed be of benefit for the carers as much as those being cared for. A sense of agency can be felt amongst participants even when parts of their reasoning have limited functioning. Society may have much to learn from the importance of the present moment and of repositioning views on productivity and purpose.

Finally, I propose that the potential of puppetry to engage people in creative practice through performance, interaction and rewriting of

²¹ Sessions of mindfulness were offered to patients suffering depression as part of a study at the University of Exeter for a period of six years from 2011 (<<http://www.exeter.ac.uk/mooddisorders/acceptclinic/>>).

personal narrative, offers participants the chance to view their lives as part of a tapestry of stories, linking through the idea of the flexible puppet as flexible and transitional object. Jo Hruby, writing about her participation in a workshop on the use of puppetry in healthcare, notes effectively their power: '(we were) ... figuring out what it is about inanimate objects made to resemble living beings that holds such potency. We might not be so interested in the finer aspects of choreography and dramaturgy when it comes to puppetry, but we remain fascinated by the power of a puppet to help, heal and develop the human psyche' (<<http://joannahruby.wordpress.com/2013/04/29/968/>>).

Works cited

- Bernier, M. & O'Hare, J. 2005. *Puppetry in Education and Therapy: Unlocking Doors to the Mind and Heart*. Bloomington: Authorhouse.
- Cohen, G. *Generations* vol. XXX, number 1: 7-15.
- Damasio, A. 1999. *The Feeling of What Happens: Body and Emotion in the Making of Consciousness*. New York: Harcourt, Brace and co.
- Downing, L. 2008. *The Cambridge Introduction to Michel Foucault*. Cambridge: Cambridge University Press.
- Francis, P. 2013. *Puppetry: A Reader in Theatre Practice*. Basingstoke: Palgrave Macmillan.
- Jurkowski, H. 2013. *Aspects of Puppet Theatre*. Basingstoke: Palgrave Macmillan.
- Kaye, Ch. & Blee, T. 1997. *The Arts in Healthcare: A Palette of Possibilities*. London: Jessica Kingsley.
- Kirmayer, L.; Lemelson, R. & Barad, M. (ed.). 2007. *Understanding Trauma: Integrating Biological, Clinical and Cultural Perspectives*. Cambridge: Cambridge University Press.
- Marshall, K. 2013. *Puppetry in Dementia Care: Connecting through Creativity and Joy*. London: Jessica Kingsley.
- McNally, R. J. 2003. *Remembering Trauma*. Cambridge, Massachusetts: Belknap Press.
- Rabinow, P. (ed.). 1991. *The Foucault Reader*. London: Penguin.
- Rojas-Bermudez, J. 1997. *Titeres y psicodrama: el objeto intermediario*. Barcelona: Paidós.
- Vizzini, J. F. 2002. *A Comparison Study of Puppet Therapy to Regular Therapy in a Chemical Dependency Twelve-Step Treatment Facility*. Dissertation thesis: Maryland: Loyola College.

White, M. 2009. *Arts Development in Community Health: a social tonic*. Oxford: Radcliffe.

Websites and online sources:

<http://www.theguardian.com/society/2012/aug/27/dementia-village-residents-have-fun>

Trimingham, Melissa. How to think a puppet. Online article: http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=5&ved=0CDYQFjAE&url=http%3A%2F%2Fkar.kent.ac.uk%2F31637%2F3%2FHow%2520to%2520Think%2520a%2520%2520Puppet%2520unpublished%2520draft.pdf&ei=LPw3VO2TB8mraZH-ggg&usg=AFQjCNEkMjhlxH5P_JtSSYQKgBTVS_hkag&sig2=_YhZyy0TSD5TznVU4tTJ6g

<http://joannahruby.wordpress.com/2013/04/29/968/>

Interviews:

Personal interview with Sally Knocker, Royal Central School of Speech and Drama, 10/12/13.